Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION	FOR EXTENSION OF TIME UNDER	Docket Number (Optional)		
(Fee	FY 2005 s pursuant to the Consolidated Appropriations Act	WRU 0239 PA		
Application Number 10/550,668			Filed 09/26/2005	
For OSTEOPOROSIS SCREENING USING RADIOGRAPHIC ABSORPTIOMETRY OF THE MANDIBLE				
Art Unit 2882			Examiner	
This is a re application	quest under the provisions of 37 CFR 1.13	36(a) to extend the perio	d for filing a reply in the	e above identified
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		Fee	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
✓	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number I have enclosed a duplicate copy of this sheet.				
Deposit Account Number I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form.				
Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
✓ attorney or agent of record. Registration Number 42,695				
	attorney or agent under 37 CF Registration number if acting under			
/William A. Jividen/			02/21/2007	
Signature			Date	
William A. Jividen			(937) 449-6400	
Typed or printed name			Telephone Number	
NOTE: Signatu ignature is rec	res of all the inventors or assignees of record of the er juired, see below.	tire interest or their representa	tive(s) are required. Submit n	nultiple forms if more than one
✓ Total	of 1 forms an	e submitted.		

This collection of Information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USFYTO to process) an application. Confidentiality is governed by \$3.05... C22 and \$7.05 FR 1.1 and 1.1. His collection is estimated to take 6 minutes. Any comments of the collection of the collection is estimated to take 6 minutes. Any comments on the amount of time you require to complete the storm and/es suggestions for reducing this burden, should be sent to the Chief Information Officer. US. Fixestin and Trademark Office, US. Department of Commerce, P.O. Box 1440, Alexandria, W. 2373-144(b). ON ON TSEND FEES OR OWNITED. FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.